

**Electronic Patent Application Fee Transmittal****Application Number:**

10597079

**Filing Date:**

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**Title of Invention:**

Adaptive physiological monitoring system and methods of using the same

**First Named Inventor/Applicant Name:**

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**Attorney Docket Number:**

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USD(\$)****Basic Filing:****Pages:****Claims:****Miscellaneous-Filing:****Petition:****Patent-Appeals-and-Interference:**

Filing a brief in support of an appeal

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**Post-Allowance-and-Post-Issuance:****Extension-of-Time:**

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Miscellaneous:				
Total in USD (\$)				540